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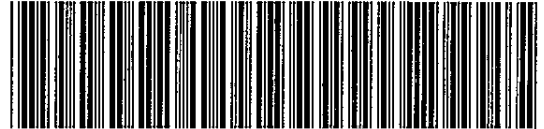
(Business Entity Name)

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DIVISION OF CORPORATIONS
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TRANSMITTAL LETTER

Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

SUBJECT: C.S.I. Professional Services Inc.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00
Filing Fee

☐ \$78.75
Filing Fee
& Certificate of Status

☐ \$78.75
Filing Fee
& Certified Copy

☒ \$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: CARMEN RAMIREZ
Name (Printed or typed)

10632 S.W. 75 LANE
Address

MIAMI, FL 33173
City, State & Zip

305-528-0601
Daytime Telephone number

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NOTE: Please provide the original and one copy of the articles.

Articles of Incorporation
Of
C.S.I. Professional Services Inc.

Article I- Corporate Names

The name of the corporation shall be
C.S.I. Professional Services Inc.

The principal place of business of this corporation shall be:
10632 SW 75 Lane
Miami, FL 33173

Article II- Nature of Corporate Business

The corporation may engage in any activity or business permitted under the laws of the United States and under the law of the State of Florida.

Article III- Capital Stock

This corporation is authorized to issue a maximum of six hundred (600) shares of stock. Shares of stock authorized shall be common stock having a par value of \$1.00 dollar per share. The consideration to be paid for each share of stock shall be fixed by the Board of Directors.

Article IV- Initial Registered Agent and Office

The corporation's initial registered agent and registered office in the State of Florida shall be:

President:
Carmen Ramirez
10632 SW 75 Lane
Miami, FL 33173

Article VI- Initial Directors

The name and post office address of each member of the initial Board of Directors is:

Carmen Ramirez
10632 SW 75 Lane
Miami, FL 33173

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Article VII- Preemptive Rights

Every shareholder, upon the issuance of sale of either new or treasury stock for cash, property, service in payment of corporate debts or other wise. Shall have the right to purchase his or her proportionate share thereof.

Article VIII- Incorporator

The name and post office box of each incorporator executing these articles of incorporation is as follows:

Carmen Ramirez
10632 SW 75 Lane
Miami, FL 33173

The undersigned incorporator (s). For the purpose of forming a corporation to do business in the State of Florida. Does make and file these articles of incorporation. Hereby declaring and certifying that the herein stated are true.

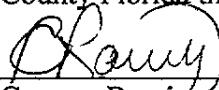
State of Florida
County of Dade

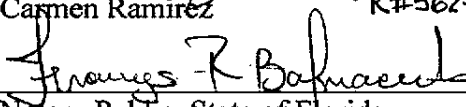
Be it remembered that on this day before me a notary public duly authorized in the state and county named above to take acknowledgements personally appeared.

Carmen Ramirez
10632 SW 75 Lane
Miami, FL 33173

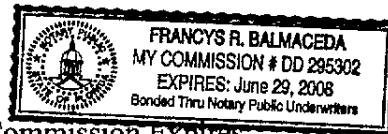
To be known to be the persons described as the incorporators in the foregoing articles of incorporation, ad he (she) acknowledged to me that he (she) executed said articles of incorporation.

In witness whereof, we have hereunto set my hand and official seal at Miami, Dade County Florida this 12th day of May, 2004.


Carmen Ramirez


Notary Public, State of Florida

R#562-112-70-677-0
FL DR.



My Commission Expires.

Certificate of Designation
Registered Agent/Registered Office

Pursuant to the provisions of Section 607.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

1. The name of the corporation is:
C.S.I. Professional Services Inc.
10632 SW 75 Lane
Miami, FL 33173
2. The name and address of the registered agent and office is:
Carmen Ramirez
10632 SW 75 Lane
Miami, FL 33173

Signature:



Title: President

Date: 12th of May, 2004

Having been named as registered agent and accept service of process for the above stated corporation at the place designated I this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statute relating to the proper and complete performance of my duties, and am familiar with and accept the obligation of my position as registered agent.

Signature:



Date: 12th of May, 2004

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